

# The New York Times

PERSONAL HEALTH

## Condoms Stay Faithful When Prevention Is the Goal

By JANE E. BRODY

Correction Appended

In a perfectly safe world, everyone who is not sexually abstinent would have sex with only one other person, who in turn is also monogamous for life. But, as we all know, the world is far from perfect. Most people have, in the course of their lives, more than one sexual partner. Hence, we have a worldwide [epidemic](#) of [sexually transmitted diseases](#), and the most disastrous is [AIDS](#).

“A condom can keep you from dying,” said Dr. M. Monica Sweeney, author with Rita Kirwan Grisman of “Condom Sense: A Guide to Sexual Survival in the New Millennium” (Lantern Books, \$10). “The health of the world depends on condoms.”

“My candidate for the greatest technological invention of the past 2,000 years is the condom,” said Dr. Sweeney, a clinical assistant professor at the [State University of New York](#) Health Sciences Center and the vice president for medical affairs at Bedford-Stuyvesant Family Health Center.

### Getting Double Value

Compelling statements indeed. But there is more truth than poetry to the claims. And while they stem primarily from Dr. Sweeney’s fight against H.I.V./AIDS (she is a member of the [President’s Advisory Council on H.I.V./AIDS](#)), they apply equally to increasing concerns about other sexually transmitted diseases, some of which can rob women of their [fertility](#).

And the value of condoms goes far beyond disease prevention. Recent studies have proved that their consistent and correct use provides excellent protection against unwanted [pregnancy](#), with no advance preparation required. In other words, you get double value for your money.

Dr. Sweeney and Ms. Grisman recount the many proven advantages of condoms, both for contraception and disease prevention.

Condoms are ready when you are. It's easy to keep them nearby for the moment they're needed.

Condoms are 98 percent effective in preventing pregnancy if used from start to finish every time you have sex. The contraceptive effect of condoms is limited to the time of use. Fertility returns as soon as you stop using them.

Condoms, again if used properly and consistently, greatly reduce the risk of acquiring most sexually transmitted diseases, including H.I.V., [gonorrhea](#), [syphilis](#), [herpes](#) simplex [virus](#), trichomoniasis and [chlamydia](#), in men and women.

The newest study shows that condoms can prevent infection by human papillomaviruses that cause cervical [cancer](#). Another recent study showed that among women already infected with [H.P.V.](#) who have early signs of developing cancer, the use of condoms can lead to regression of their cervical lesions.

Condoms reduce disease risk during vaginal, oral and anal sex. Unlike oral contraceptives, condoms are safe even if you smoke. And they do not cause weight gain. And unlike IUD's, condoms do not cause heavy menstrual bleeding.

Condoms are not messy, like spermicidal creams and jellies. Condoms need not disrupt sexual spontaneity. Rather, they can be easily incorporated into foreplay. Condoms are inexpensive, require no prescription and are readily available in pharmacies and other retail venues.

And condoms can be used safely and effectively at any age, from the teens to the golden years, with no risk of harmful side effects.

Many people harbor misconceptions about condoms. The modern latex condom, the only kind that can prevent transmission of H.I.V., is much thinner than condoms of yore and can provide the wearer with more sensation while preventing pregnancy and disease.

Dr. Sweeney says, “For all those guys who posture and rant about the pleasure that condoms deprive them of, I have this question: Have you ever had an orgasm worth dying for?”

Another major misconception concerns the condom’s ability to prevent pregnancy. As typically used, condoms are associated with a pregnancy rate of 15 percent, which, as one expert put it, “suggests suboptimal use.”

This expert, Dr. Anita L. Nelson of the [University of California](#), Los Angeles, said, “Pregnancy rates with correct and consistent condom use are only 2 percent.” This is no different from the contraceptive effectiveness of birth control pills.

So why this discrepancy? And why is protection against sexually transmitted diseases less than what experts say it should be?

#### Absence of Consistency

[A study of 243 sexually active women](#) by Dr. Nelson published in April in The American Journal of Obstetrics and Gynecology reported common impediments to the consistent use of condoms. The women were provided with free condoms and detailed information and demonstrations about how they should be used.

Nearly 44 percent of the women reported inconsistent condom use, with the least consistent use among those who were most sexually active. Thinking they were not at risk of pregnancy was the most common reason, followed by running out of condoms, disliking condoms, using withdrawal for contraception and forgetting.

Dr. Nelson suspects that because information about condom use depends on self-reporting based on recall, it “can overstate actual condom use, so that consistent condom use may be even less than reported.”

The highest risk of unprotected sex occurs among adolescent women. In addition to excuses like not expecting to have sex or being overcome by

passion and desire, many teenage women with boyfriends say they are coerced into having sex they do not want.

The most common reason is fear of losing the boyfriend. In such cases, negotiating the condom use may be beyond most young women. They should be taught to say, “No condom, no sex.”

### The Challenge of Negotiating

In a [study](#) of 1,843 men and women followed for 18 months, women had nearly twice the risk for getting a herpes infection as heterosexual men. Forty percent of the participants reported condom use zero to 25 percent of the time, and 29 percent reported using them more than 75 percent of the time. Those with the highest level of condom use had the lowest rates of herpes infections. The findings were published Nov. 15, 2005, in *The Annals of Internal Medicine*.

There is recourse for people exposed to H.I.V., but it's not as simple as a morning-after pill. It involves a six-week regimen of antivirals.

Condoms are not perfect. They do sometimes, though rarely, break. And while they include instructions, few people bother to read them, especially in the heat of the moment. Dr. Sweeney urges men to practice in advance, learning how to open the package without damaging the condom and how to put one on and remove it.

Proper use of a condom requires putting it on the erect penis prior to any genital contact, withdrawing while the penis is still erect, holding the condom firmly to keep it from slipping off and using only water-based lubricants.

People with latex [allergies](#) can try using two condoms — one that is latex-free (but alas, not protective against AIDS) over or under a latex one, depending on which partner is allergic.

### **Correction: Aug. 23, 2006**

*The Personal Health column in Science Times on Tuesday, about condoms and prevention of disease, omitted a type of condom that can prevent transmission of H.I.V. In addition to latex condoms, polyurethane ones are also effective.*

